

*RETURN TO FMF - LOCATION 7540

QUERY CONTROL FORM		RTIS USE ONLY	
Application No. <u>09662004</u>	Prepared by <u>[Signature]</u>	Tracking Number <u> </u>	
Examiner-GAU <u>BREWSTER-2823</u>	Date <u>5-17-04</u>	Week Date <u> </u>	
	No. of queries <u>1</u>		

JACKET			
a. Serial No.	f. Foreign Priority	k. Print Claim(s)	p. PTO-1449
b. Applicant(s)	g. Disclaimer	l. Print Fig.	q. PTOL-85b
c. Continuing Data	h. Microfiche Appendix	m. Searched Column	r. Abstract
d. PCT	i. Title	n. PTO-270/328	s. Sheets/Figs
e. Domestic Priority	j. Claims Allowed	o. PTO-892	t. Other

SPECIFICATION	MESSAGE
a. Page Missing	<p><u>1) Improper Dependency: Claim # 4 (renumbered 3) is dependent from Claim # 3 which was cancelled. Please resolve.</u></p> <p style="text-align: center; margin-top: 20px;"><u>Thus</u></p>
b. Text Continuity	
c. Holes through Data	
d. Other Missing Text	
e. Illegible Text	
f. Duplicate Text	
g. Brief Description	
h. Sequence Listing	
i. Appendix	
j. Amendments	
k. Other	
CLAIMS	
a. Claim(s) Missing	
b. Improper Dependency	
c. Duplicate Numbers	
d. Incorrect Numbering	
e. Index Disagrees	
f. Punctuation	
g. Amendments	
h. Bracketing	
i. Missing Text	
j. Duplicate Text	
k. Other	
	<p>RESPONSE <u>312 Amendment submitted by Applicant entered for corrected claims.</u></p>
	initials <u>[Signature]</u>
	initials <u>W/B</u>